

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

101595214 3-24-06

CLAIMS

	AS FILED		AFTER		AFTER	
	1 ST AMENDMENT		2 ND AMENDMENT		1 ST AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2						
3						
4	3					
5	3					
6	①					
7	①					
8	1					
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TOTAL IND.	2		1			
TOTAL DEP.	10		6			
TOTAL CLAIMS	12		7			

	AS FILED		AFTER		AFTER	
	1 ST AMENDMENT		2 ND AMENDMENT		1 ST AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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